for clinical therapeutics, rather than the empirical method as ordinarily practiced, and which amounts to nothing more than guessing and carelessness. By the same token, the pharmacological analysis is confirmed or corrected, and in any case benefited. But, the greater benefit, no doubt, eventually goes to the patient.

Grossmann, M., and Sandor, J.: Klin. Wochn. 1923, 1833, "Zur klinischen Pharmakologie des Nitrogly-

Grossmann, M., and Sandor, J.: Klin. Wochn. 1923, 2:1833, "Zur klinischen Pharmakologie des Nitroglycerins."
Hay: Deutsch. med. Woch., 1884, p. 440, "Ueber die Wirkung der Nitrite und des Nitroglycerin bei Angina Pectoris."

THE NEW CONTROL OF SURGEONS

If the recent article under this title by Mr. William G. Shepherd (Harper's Magazine) were only the usual stupid and in part untrue attack upon the medical profession of our country, it might be ignored, as such articles usually are. There are two phases to this new attack upon the 140,000 odd of the total of some 150,000 educated physicians of the United States that make it demand some attention by all friends of better medicine everywhere.

One of these points is the editorial commendatory note italicized and published at the top of the article, which, whether or not so intended, will not produce a pleasing reaction in the minds and hearts of readers who still believe in medicine as a humanitarian profession and who still believe the body of educated physicians are just as honest, and thousands of them just as capable, as are the handful that the author exempts in his diatribe.

The other important point in the article is, the implication that a special medical organization with only some 6000 members stands sponsor for the alleged information which the writer attempts to impart to the world. Unless careful readings of the article have misled us as to the author's intentions, some of his statements about the American College of Surgeons are fabricated; we hope with greater care than are some of his other statements that have no basis whatever in fact. It is hard to believe that the astute leaders of the American College of Surgeons, even if they thought as Shepherd implies they do, would be so stupid as to put such a very thin veil over the obvious propaganda which appears to run like a thread through the article. Nor is it conceivable that the authorities of the College of Surgeons, a private and unofficial organization, would endorse a tirade against their fellow physicians—a public confidence-destroying criticism which has its appeal in an invidious comparison between a few thousand physicians, members of a limited organization of one specialty of medicine, and the probably more than 75,000 other physicians who are also doing surgery in the country, and for the most part doing it honestly and well. They graduated from the same schools as did members of the College of Surgeons and are honorable members of the official medical organizations of the country.

Even should a few—and they are probably only a few-members of the College of Surgeons believe that their new and, in Shepherd's eyes, important obligation to their self-selected standards entitles them to assume such a holier-than-thou attitude, they

would surely not be so dense as to deal the blow to their own organization that the article is sure to cause. There can be little doubt that, whatever else this essay may do, it will prove first a severe blow to the College of Surgeons, and secondarily of course, to the cause of better medicine and all medical agencies. Already reports are coming to this editor of the chortlings of glee among the enemies of medical progress. They are saving that there are only some 6000 honest physicians among 150,000, and that these honest ones have banded themselves together with a hidebound oath "on the honor of gentlemen" to save medicine.

As to the article itself, most of it is the usual line of stupid propaganda that physicians have grown accustomed to see in certain kinds of journals prepared by publicity agents. A few particularly choice bits with comment, which of course is unnecessary to physician readers, may help the article on its way. The author says:

"To put it coldly, it is not entirely unlikely that some day you or I or some one we love may be wheeled into an operating-room, put to sleep under an anesthetic and be helplessly subjected to a surgeon's knife, at the risk of having life leave the body then and there, or being physically weakened for life, for no other motive than to put money into the pocket of a surgeon or a doctor.'

This is a wholesale indictment of the integrity not only of physicians, but of hospitals, which of course is true only in those rare instances that indicate the untruth of the proposition. The author must have had some qualms himself, because he hastens to assure the reader that he received his information from "the men of the white aprons and rubber gloves-the surgeons themselves." We, of course, don't know who his "rubber-gloved" advisors were, but all of the other 140,000 surely will not allow such uses of their names and bartering of their principles to go unchallenged. We shall be surprised if many of the members of the College of Surgeons do not repudiate some of the author's statements.

As an apology for not giving the names of the physicians who gave him the misinformation about their colleagues, Shepherd makes the statement that: ". . . my readers will please remember that doctors and physicians are under an oath, sacred to their profession, against publicity, so that I cannot use their names."

Physicians will, of course, smile when they read that statement, which to the unsuspecting general reader appears plausible. Surely a casual glance at the newspapers almost any day will convince any reader that all sorts of physicians, both in and out of the College of Surgeons, are being interviewed and are writing for public reading.

We assume that the author is being facetious when he discusses "cutting the greed glands out of surgery." He mentions that some of the handful of surgeons he endorses because they are "controlled" have become so greedless that they refuse to operate on the Chicago newly rich who have the operation

He talks easily and freely about "fee splitting" and "division of fees" as if they were the same thing. He condemns the physician for his part in splitting fees, but seems to feel certain that the surgeon is protected from blame for his part in a nefarious contract that requires two people to make, by the oath that some surgeons take "on their honor as a gentleman" that they won't split fees. It would be interesting to know if Mr. Shepherd believes that an oath changes a man's heart or even his conduct. If he does, he must feel lonesome in this workaday world.

Methods for the honorable division of fees where more than one physician has contributed service in earning the fee are provided for in the principles of ethics of the American Medical Association. Obviously, each physician is entitled to just the proportion of the fee he has earned, and this division must have the patient's approval. Obviously, any portion of any fee going to anyone who has not earned it is dishonest and forbidden by medical ethics—this is so-called "fee splitting" as distinguished from honorable and honest "division of fees." Of course, anyone who believes this dishonest "fee splitting" can be controlled by an oath made "on the honor of a gentleman" is inadequately advised of the methods of dishonest people.

One of the most obviously deceptive statements in this article is, "medical schools are recommending their students for internship in the minimum-standard hospitals." It would have been easy for the great surgeons the author says he consulted, as well as those the editorial note says have read and approved the article, to have told the truth, that the ratings of hospitals for internships were made and controlled by the Council on Medical Education and Hospitals of the American Medical Association and not by the American College of Surgeons, as implied in the article.

But why go on? Most physicians must have read Shepherd's article, because the editor of the Journal has never before received so many protests from angry men about any other article denouncing physicians unfairly, unjustly and, in part, untruthfully.

Of course there are instances of unnecessary surgery; of "fee splitting"; of physicians attempting more than they should with or without the knife; of over-charging, but they are not the rule, and such an onslaught upon the honor, honesty and integrity of a great profession shall not go unchallenged.

If reports to official medical organizations from their own members are true, dishonest methods occur proportionately among the 6000 odd surgeons who have pledged themselves "on the honor of gentlemen" that they would refrain from these nefarious practices as they do among the other 100,000 odd who have not taken the oath.

BROADENING OUR MEDICAL HORIZON

Elsewhere in this issue of the Journal is published a teaching innovation by the Department of Medicine of the University of California Medical School. In a letter William J. Kerr, head of the department, says that the object of this new method of teaching is to better prepare the student in the art

of medicine, economics, ethics, and citizenship responsibilities.

Certainly, no one should know better than successful alumni the importance of this step, and they will know what to teach and how to teach it.

Let us hope that somewhere in their curriculum, as well as that of other schools, provision will be made to teach medicine as a service-loving vocation where wealth cannot be expected and where all service is consecrated.

"THE GORGAS IDEA"

Physicians everywhere are much interested in having the splendid services rendered to humanity by the late Dr. Gorgas recognized by some fitting monument to his memory. Franklin Martin of Chicago, who has been asked by some of those interested to canvass sentiment, was recently in California on that mission. He was entertained and spoke in Los Angeles and San Francisco.

On Wednesday evening, January 13, local fellow members of the College of Surgeons entertained the visitor at dinner at the Bohemian Club. After dinner Martin presented his tentative program for the development of the "Gorgas Idea" to a large audience of physicians at the San Francisco County Medical Society hall.

The subjects of "Standardization of Hospitals" and the proposal to extend "standardization" to all other agencies of medicine, including medical books and what not, was explained and commended. After indicating also the necessity of more and better organizations of physicians who would assume leadership in medical and public health matters, the speaker struck a responsive chord when he proposed a "Gorgas Foundation" as a living monument to the memory of our departed colleague, rather than the usual monument of brass and stone. It was pleasing and gratifying to physicians to hear reviewed the splendid work of Gorgas and the analysis of the great service he rendered in so many fields, but particularly in holding the medical services to our men during the war in the hands of those adequately educated and trained to give the best that medicine had to offer.

The fundamental idea of the development of the "Gorgas Idea," Martin stated, is to give to every individual the heritage to which he is entitled—Good Health—by means of:

Scientific research into the cause, prevention and cure of disease;

The application of such preventive and curative measures as may be necessary under the supervision of the leaders in scientific medicine;

Save to the world the present economic loss in human resources from preventable disease;

Prevent the stupendous economic loss resulting from sickness, ill-health and preventable deaths;

By transforming disease-infested localities into fertile and productive areas, increase the wealth of the individual and the nation.

President Wilbur, W. E. Musgrave and Celestine J. Sullivan were called upon by Wallace I. Terry, chairman of the meeting, and in speaking informally expressed the fullest endorsement of California med-